P110000050843

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone #	#)			
•		•			
PICK-UP	☐ WAIT	MAIL.			
					
					
(Bu	usiness Entity Name	∍)			
(Do	ocument Number)				
Certified Copies	Certificates of	of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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FILED

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SECRETARY OF STATE

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R.A.

1Brown 11-1-11

COVER LETTER

TO:	Amendment Section Division of Corporation	as					
SUBJ	ЕСТ:	American Jus	stice, P.A.				
DOCI	JMENT NUMBER:		000050843				
The er	closed Statement of Char	nge of Registered Offic	ee/Agent and fee are submitted	for filing.			
Please	return all correspondence	concerning this matte	r to the following:				
	<u></u>		Edwards				
	· · · · · · ·	Name of Co	ntact Person				
	American Justice, P.A.						
		Firm/C	ompany				
		4.45					
			Ith Street ress				
		Aud	1033				
		Fort Lauderda	ale. FL 33301				
	Fort Lauderdale, FL 33301 City/State and Zip Code						
		Theresa@americ	anjusticepa.com				
	E-mail address: (to be used for future annual report notification)						
F 4		••					
For fur	ther information concerni	ng this matter, please	call:				
	Theresa Ed		at (954) Area Code & Daytime T	463-5266 x (ዕን			
	Name of Contact	Person	Area Code & Daytime T	elephone Number			
Enclose	ed is a \$35.00 check made	e payable to the Depart	ment of State.				
	Divisio P.O. Bo	Address: ment Section n of Corporations ox 6327 ssee, FL 32314	Street Address: Amendment Section Division of Corpor Clifton Building 2661 Executive Ce	rations			
		-, ·	Tallahassee, FL 32				

\$TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change	isions of sections 607.0502, 617.0502, is submitted for a corporation organiz change its registered office or registere	ed under the laws of the State of	Florida
1. The name of the co	orporation: American Justice,	P.A	
2. The principal offic	e address: 412 NE 4th Street, Fo	rt Lauderdale, FL 33301	
3. The mailing address	ss (if different):		
4. Date of incorporati	ion/qualification: 5-31-201	Document number: P	11000050843
	et address of the current registered age at of State: (If resigned, enter resigned)		h the
The	eresa Edwards		- 1
950	0 South Pine Island Road		ZOLI OCT 28 SECRETAR'S TALLAHASS
Pla	intation, FL 33324		AHA CT 2
(if changed):	et address of the new registered agent (if changed) and /or registered offi	ice FF F
The	eresa Edwards		9 07
412	2 NE 4th Street		- Approximately and the second
	P.O. Box NOT ac	cceptable	'
<u>Ft.</u>	Lauderdale, FL 33301		
_	its registered office and the street ad lentical.		
Such change was aut authorized by the boo	thorized by resolution duly adopted bard, or the corporation has been notif	y its board of directors or by an led in writing of the change.	officer so
Mresa E	Idway S	Theresa Edwards, Proposed name and titl	resident
Phereby accept the a I further agree to con of my duties, and I ar document is being fil corporation has been	ppointment as registered agent and a hply with the provisions of all statute m familiar with and accept the obliga ed merely to reflect a change in the r n notified in writing of this change.	agree to act in this capacity s relative to the proper and com tion of my position as registered egistered office address, I hereb	plete performance I agent. Or, if this y confirm that the
heresa &	June C	October 20, 201	11
	of Registered Agent	October 20, 201	<u>.1</u>
If signing on behalf o	of an entity:		
Typed or	Printed Name		
	* * * FILING FEE:	\$35.00 * * *	

Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314